



## UNITED STATES PATENT AND TRADEMARK OFFICE

UNITED STATES DEPARTMENT OF COMMERCE  
 United States Patent and Trademark Office  
 Address: COMMISSIONER FOR PATENTS  
 P.O. Box 1450  
 Alexandria, Virginia 22313-1450  
 www.uspto.gov

## BIB DATA SHEET

CONFIRMATION NO. 9779

SERIAL NUMBER	FILING or 371(c) DATE	CLASS	GROUP ART UNIT	ATTORNEY DOCKET NO.	
10/816,365	04/01/2004	705	2614	5106-7CIP2	
<b>RULE</b>					
<b>APPLICANTS</b> Chi Eng, Wayne, NJ; Michael Lemberg, New York, NY; Alexander Mashinsky, Memphis, TN; Guillermo Bodnar, South Riding, VA; David Sumka, Bedminster, NJ;					
<b>** CONTINUING DATA *****</b> This application is a CIP of 09/996,837 11/29/2001 PAT 6,731,729 which is a CIP of 09/692,769 10/18/2000 PAT 6,542,588 which is a CON of 09/129,413 08/05/1998 PAT 6,226,365 which is a CIP of 08/927,443 09/11/1997 PAT 6,005,926 and is a CIP of 08/920,567 08/29/1997 ABN and said 09/996,837 11/29/2001 is a CIP of 09/551,190 04/17/2000 PAT 6,442,258 which is a CON of 09/213,703 12/17/1998 PAT 6,144,727 which is a CIP of 09/129,413 08/05/1998 PAT 6,226,365 which is a CIP of 08/927,443 09/11/1997 PAT 6,005,926 and is a CIP of 08/920,567 08/29/1997 ABN					
<b>** FOREIGN APPLICATIONS *****</b>					
<b>** IF REQUIRED, FOREIGN FILING LICENSE GRANTED *** SMALL ENTITY **</b> 06/16/2004					
Foreign Priority claimed <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No 35 USC 119(a-d) conditions met <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No Verified and Acknowledged <u>/BINH KIEN TIEU/</u> Examiner's Signature	<input type="checkbox"/> Met after Allowance BKT Initials	<b>STATE OR COUNTRY</b> NJ	<b>SHEETS DRAWINGS</b> 19	<b>TOTAL CLAIMS</b> 32	<b>INDEPENDENT CLAIMS</b> 2
<b>ADDRESS</b> Cohen, Pontani, Lieberman & Pavane 551 Fifth Avenue, Suite 1210 New York, NY 10176 UNITED STATES					
<b>TITLE</b> Method and a system for settlement of trading accounts					
<b>FILING FEE RECEIVED</b> 558	FEES: Authority has been given in Paper No. _____ to charge/credit DEPOSIT ACCOUNT No. _____ for following:		<input type="checkbox"/> All Fees <input type="checkbox"/> 1.16 Fees (Filing) <input type="checkbox"/> 1.17 Fees (Processing Ext. of time) <input type="checkbox"/> 1.18 Fees (Issue) <input type="checkbox"/> Other _____ <input type="checkbox"/> Credit		